

PATENT APPLICATION FEE DETIERMINATION RECORD Effective October 1, 2000

		CLAIMS AS	S FILED -	PART		SMALL ENTITY			NTITY		OTHER THAN	
(Column 1				1)	(Column 2) TYPE				OR	SMALL		
TOTAL CLAIMS								RATE	FEE]	RATE	FEE
FOR			NUMBER FILED		NUMB	ER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			川) minus 20事 * <i>没</i> ')		X\$ 9=		OR	X\$18=	486
INDEPENDENT CLAIMS			5 minus 3 = * 2					X40=		OR	X80=	1101)
MULTIPLE DEPENDENT CLAIM PRESENT					,		f	+135=	} }	OR	+270=	140
* If the difference in column 1 is less than zero, ente					"0" in c	olumn 2	L	TOTAL		OR	TOTAL	1356
CLAIMS AS AMENDED - PAR								TOTAL		On	OTHER	<u> </u>
(Column 1) (Column 2) (Column 3)							_	SMALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	· 55	Minus	** 4	7	= 8		X\$ 9=		OR	X\$18 = ≰	144.00
	Independent	• 5	Minus	··· 5		=		X40=		OR	X80=	-
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	ENDEN	CLAIM			+135=		OR	+270=	
							L	TOTAL			TOTAL	144.00
	(Column 1) (Column 2) (Column 3)							DDIT. FEE			ADDIT. FEE مــل	e of
AMENDMENT B	翻	CLAIMS REMAINING AFTER	123	HIGH NUM PREVIO	EST BER	PRESENT EXTRA	Г	RATE	ADDI- TIONAL		RATE	ADDI- TIONAL
	沙沙 菜。	AMENDMENT	1.10	PAID		LATINA	╽┟		FEE			FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF MU	Minus	***	CLAIM	=		X40=		OR	X80=	
	11101111202	TATION OF IM	JEHI EE DEI	LINDLINI	OLAIIVI			+135=		OR	+270=	
							A	TOTAL ODIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colun	nn 2)	(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X40=		ı	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT				CLAIM			740-		OR	700=	
*	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+270=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
	The "Highest Num	her Previously Pai	d For" (Total or	Independe	ant\ ie tha	highest number	r foun	d in the ann	ropriate hov	in col	ımn 1	